

FORM **1746** (REV. 4-2003)

MAIL COMPLETED APPLICATION TO:

MISSOURI DEPARTMENT OF REVENUE DIVISION OF TAXATION AND COLLECTION B.O. BOY 3300

	0-735-2966	FΑ		22-1722	2					
1. IF YOU HAVE BEEN ISSUED A MISSOURI TAX I.D. NUMBER BY THE DEPARTMENT OF REVENUE, ENTER BELOW										
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STATE AGENCY			RI SOCIAL, FRATERNAL MISSOURI POLITICAL SUBDIVISION				-			
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STREET ADDRESS — DO NOT USE P.O. BOX OR RURAL ROUTE										
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	STATE	STATE 711		IP CODE						
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MISSOURI CHARTER NUMBER			DATE INCORPORATED M M D D C C Y Y							
MISSOURI CERTIFICATE	OF AUTHORITY NO.		DATE REGISTER	ED IN MISSO	URI		STATE OF INCORPORATION			
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CITY		ZIF	P CODE		COUNTY					
OR RURAL ROUTE)										
OR ROBAL ROOTL)										
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COMPLETE AN	ID SIGN BACK	(0	F APPLIC	ATION						
	E-mail: salesus HE DEPARTMENT OF R HICO ON FE ST CIV MISSOURI CHARTER NU MISSOURI CERTIFICATE ESS) OR RURAL ROUTE)	E-mail: salesuse@mail.dor.s HE DEPARTMENT OF REVENUE, ENTER BE HIGHER EDUCATIO DN FEDERAL OR MISSO STATE AGENCY CIVIC STATE MISSOURI CHARTER NUMBER MISSOURI CERTIFICATE OF AUTHORITY NO. ESS) STATE STATE OR RURAL ROUTE)	E-mail: salesuse@mail.dor.state HE DEPARTMENT OF REVENUE, ENTER BELOV HIGHER EDUCATION FEDERAL OR MISSOUR STATE AGENCY CIVIC MISSOURI CHARTER NUMBER MISSOURI CERTIFICATE OF AUTHORITY NO. ESS) STATE ZI OR RURAL ROUTE)	E-mail: salesuse@mail.dor.state.mo.us HE DEPARTMENT OF REVENUE, ENTER BELOW HIGHER EDUCATION	E-mail: salesuse@mail.dor.state.mo.us HE DEPARTMENT OF REVENUE, ENTER BELOW HIGHER EDUCATION	HIGHER EDUCATION RELIGIOUS HIGHER EDUCATION RELIGIOUS FEDERAL OR MISSOURI STATE AGENCY MISSOURI POLITION CIVIC MISSOURI POLITION STATE ZIP CODE COUNTY MISSOURI CHARTER NUMBER DATE INCORPORATED M M D D C C Y Y MISSOURI CERTIFICATE OF AUTHORITY NO. DATE REGISTERED IN MISSOURI M M D D C C Y Y ESS) STATE ZIP CODE COUNTY	E-mail: salesuse@mail.dor.state.mo.us HE DEPARTMENT OF REVENUE, ENTER BELOW HIGHER EDUCATION			

MO 860-2158 (4-2003) DOR-1746 (4-2003)

FORM 1746						
ORGANIZATION OR AGENCY OFFICERS						
6. NAME (LAST, FIRST, MIDDLE INITIAL)	TITLE	S	OCIAL SECURITY NUMBER	BIRTHDAT	Ē	
STREET ADDRESS	CITY			STATE	ZIP CODE	
NAME (LAST, FIRST, MIDDLE INITIAL)	TITLE	S	OCIAL SECURITY NUMBER	BIRTHDAT	Ē	
STREET ADDRESS	CITY			STATE	ZIP CODE	
DESCRIPTION OF ORGANIZATION 7. Brief statement of organizational pu	_					
ATTACHMENTS Federal or Missouri state agencies, M expense, or schools of higher education 8. If you are a charitable, social, frate	are not required to furnis	sh the docume	ents requested in items 8	8-11 listed be	elow.	
exemption letter, Federal Form 501(automatically exempt you from Miss	souri sales/use tax.			-		
ATTACH a copy of the Certificate of OR INCORPORATED.	Incorporation or Registrat	tion issued by	y the Missouri Secretary	of State, IF F	REGISTERED	
10. ATTACH a copy of your Bylaws.						
11. ATTACH a complete financial history sources and amounts of income a budget for one year.	nd a breakdown of expen					
NAME OF PERSON COMPLETING APPLICATION (PRINT NAM	E)					
TITLE			PHONE NUMBER			
SIGNATURE			/			
12. I swear or affirm that the information reporte	d in this form and any attached	supplements is	true and correct as to every	material matter:		
that the present nature, purpose and activit were issued and will continue to remain the	ies of the above-named organi		•			
that I will remain knowledgeable of the sta Department of Revenue, of any change in would no longer qualify as exempt, either b purpose or activities.	atutes and regulations governing circumstances which could rea	asonably lead n	ne to believe that the above-	named organiz	ation or agency	
It is understood that any misrepresentation revocation of any exemption letter issued to		my part to fulfill	the promises entered into h	ere will result in	n the immediate	

TITLE

DATE

SIGNATURE OF OFFICER OR RESPONSIBLE PERSON

INSTRUCTIONS FOR COMPLETING THE MISSOURI SALES/USE TAX EXEMPTION APPLICATION

Missouri Tax I.D. Number

If you have been issued a Missouri Tax I.D. Number by the Missouri Department of Revenue, enter that number in the space provided. Providing your Missouri Tax I.D. Number will ensure the Department of Revenue registers your organization accurately.

Type of Exemption

Check the box that most closely relates to the type of exemption for which you are applying. Charitable organizations are those that benefit individuals not within the organization. Civic groups are generally those that benefit the community at-large.

The religious exemption includes churches, ministries, and religious groups. These organizations are exempt for sales and purchases if within their religious, charitable, or educational function.

Social/fraternal organizations are only exempt if the sale or purchase is made solely for their charitable or civic functions and activities.

Educational groups, other than public or private elementary, secondary, or higher education institutions, should select either the civic, religious, or charitable option, depending on the nature of the educational organization.

Generally, Missouri law does not provide a sales/use tax exemption for labor unions, political organizations, home owner's associations, or out-of-state political subdivisions.

To qualify for a private, not-for-profit, elementary, or secondary school or a school of higher education, you must have received accreditation by an appropriate accrediting authority.

Organization Name and Location

Provide the name and street address of your organization.

Incorporated Organizations

If you are incorporated in Missouri, check "Missouri Corporation" and provide the required information.

If you are an out-of-state corporation, and own property in Missouri, check the "Out-of-State Corporation" box and provide the required information.

Mailing Address

If correspondence should be mailed to an address other than the address of the organization or agency, provide the address to be used for mailing purposes (i.e., officer's, accountant's, or lawyer's address, etc.) P.O. Box may be used.

Record Storage

If the books and records are kept at an address (location) other than that of the organization, agency, or mailing address, provide the address here.

Organization or Agency Officers

Provide all of the requested information for one or two of the organization's or agency's officers.

Description of Organization

Summarize the primary organizational purpose in one or two brief statements. List the main activities of the organization or agency.

Attachments

The attachments are used to determine whether an organization is exempt under Missouri law. Please remember to include all attachments pertaining to your organization. If you do not include all required attachments, it could result in a delay in issuing your exemption letter or a denial of your application.

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IRS Exemption Ruling

If you are registered with the Internal Revenue Service (IRS) and have received an exemption described in section 501(c), you **must** attach a copy of the most current letter of exemption issued to you by the IRS. (The letter must indicate the exempt status code.)

If you have not received a letter from the IRS, you **must** contact your local IRS office and request an application for recognition of exemption or call toll-free 1 (800) TAX-3736.

IRS OFFICE LOCATIONS:

608 E. Cherry Street, Columbia, Missouri 65201
3702 W. Truman Blvd., Jefferson City, Missouri 65109
1100 Main Street, City Center Square, Kansas City, Missouri 64105
1114 Market Street, St. Louis, Missouri 63101

NOTE: Churches are not required to submit the 501(c) letter.

Name of Person Completing Application

Please ensure you provide this information. While most correspondence will go to the organization or mailing address, the Department of Revenue may be able to resolve any questions by calling the responsible person.

Signature

This application must be signed by an officer or responsible person of the organization in order for the exemption letter to be issued.